

CITY OF EL PASO DEPARTMENT OF ENVIRONMENTAL SERVICES ANIMAL SERVICES

5001 Fred Wilson Dr. El Paso, Texas 79906 Phone (915) 842-1000 Fax (915) 842-1008



Application: Animal Welfare Organization Permit (7.14.090)

Organization Name:	Phone:
Property Address:	
City/State/Zip:	
Mailing Address (if different from above):	
City/State/Zip:	
Number of Animals Kept per week: Acreage: Square Footage An	
Type of Animal (Example: Dogs, Cats, Livestock, etc.)	Type of Enclosure (Cage, pen, stall, In home, dog house, garage, pasture)

Are you a 501C3 Tax Exempt Organization: Yes () No ()
If the organization is not a tax exempt non-profit corporation, please provide a description of the organizational structure in the space below
What is the length of time it has existed?years
How will you find new homes for animals?
How will you train any employees or volunteers?
What are your plans for dealing with animals with behavior problems and medical/health problems?(Check all that apply) Training Animal Behaviorist External Contract Other: Type of veterinary care for animals? (Check One) Contracted Veterinarian Contracted Veterinary Clinic On Staff Veterinarian Volunteer Veterinarian
Documentation Checklist: Zoning Compliance Letter Please list Organizational Structure, names/addresses of governing board: 501(C)3 Documentation Active Rescue Partner Permit Good Standing documentation from Texas Comptrollers of Public Account documentation Texas Health and Safety Code Section 823.003(d) shelter inspection report Anticipated percentage of work information regarding abandoned/recovered animals
Signature: Date: Date: